## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	: 4	79 OF	: 1	035
(c	(check only one)									
	X	11a		11b		11c		12		
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NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CON				
Full Name (Last, First, Middle Initial)  MR. JOHN A. PAGIN  Mailing Address 104 WAYNE ST  City HOWE  FEC ID number of contributing federal political committee.  Name of Employer  RETIRED  Receipt For:  Primary General Other (specify)	State Zip Code IN 46746-9788  C  Occupation RETIRED  Aggregate Year-to-Date ▼	Date of Receipt  06 15 2012  Transaction ID: SA11.14642390  Amount of Each Receipt this Period  400.00  CONTRIBUTION		
Full Name (Last, First, Middle Initial)  MS. HOPE S. PALMER  Mailing Address 1414 REED CREEK DR.		Date of Receipt		
City DRAPER  FEC ID number of contributing federal political committee.  Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Receipt For:  Primary General Other (specify) ▼	State Zip Code VA 24324-2865  C  Occupation INFORMATION REQUESTED PER BEST EFF  Aggregate Year-to-Date ▼  201.00	Transaction ID: SA11.14645938  Amount of Each Receipt this Period  40.00  CONTRIBUTION		
Full Name (Last, First, Middle Initial)  KIMBERLY J. PANICHI  Mailing Address 150 KINGSTON ROAD  City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
MEDIA  FEC ID number of contributing federal political committee.  Name of Employer  INFORMATION REQUESTED PER BEST EFFORMATION REQUESTED PER BEST EFFORMATION FOR MATERIAL General Other (specify) ▼	PA 19063-1853  C Occupation	Transaction ID : SA11.14635809  Amount of Each Receipt this Period  1000.00  CONTRIBUTION		
SUBTOTAL of Receipts This Page (optional)		1440.00		
TOTAL This Period (last page this line number of	only)			